## **Application Data Sheet**

## **Application Information**

Secrecy Order in Parent Appl.::

Application number::	
Filing Date::	01/22/04
Application Type::	Regular
Subject Matter::	Utility
Suggested classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R??::	
Number of CD disks::	
Number of copies of CDs::	
Sequence Submission::	
Computer Readable Form (CRF)?::	•
Number of copies of CRF::	
Title::	H. pylori Fucosyltransferases
Attorney Docket Number::	019957-019400US
Request for Early Publication::	No
Request for Non-Publication::	No
Suggested Drawing Figure::	18
Total Drawing Sheets::	27
Small Entity?::	Yes
Latin name::	
Variety denomination name::	
Petition included?::	No
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers One::	

No

## **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Canada

Status:: Full Capacity

Given Name:: Joanne

Middle Name::

Family Name:: Simala-Grant

Name Suffix::

City of Residence:: Edmonton, AB State or Province of Residence::

Country of Residence:: Canada

Street of Mailing Address:: 10115 87 Avenue

City of Mailing Address:: Edmonton, AB

State or Province of mailing address::

Country of mailing address:: Canada

Postal or Zip Code of mailing address:: T6E 2P3

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Canada

Status:: Full Capacity

Given Name:: Diane

Middle Name::

Family Name:: Taylor

Name Suffix::

City of Residence:: Edmonton, AB

State or Province of Residence::

Country of Residence:: Canada

Street of Mailing Address:: 3911 118 Street

City of Mailing Address:: Edmonton, AB

State or Province of mailing address::

Country of mailing address::

Canada

Postal or Zip Code of mailing address:: T6J 1X2

Applicant Authority Type::

Inventor

Primary Citizenship Country::

US

Status::

**Full Capacity** 

Given Name::

Karl

Middle Name::

F.

Family Name::

Johnson

Name Suffix::

City of Residence::

Hatboro

State or Province of Residence::

PA

Country of Residence::

US

Street of Mailing Address::

5320 Ivystream Road

City of Mailing Address::

Hatboro

State or Province of mailing address::

PA

Country of mailing address::

Postal or Zip Code of mailing address:: 19040

Applicant Authority Type::

Inventor

Primary Citizenship Country::

US

Status::

**Full Capacity** 

Given Name::

Daniel

Middle Name::

**James** 

Family Name::

Bezila

Name Suffix::

City of Residence::

Philadelphia

State or Province of Residence::

PA

Country of Residence::

US

Street of Mailing Address::

715 Red Lion Road, 2nd Floor

City of Mailing Address::

Philadelphia

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State or Province of mailing address:: PA

Country of mailing address::

Postal or Zip Code of mailing address:: 19115

**Correspondence Information** 

Correspondence Customer Number:: 20350

Representative Information

Representative Customer Number:: 20350

**Domestic Priority Information** 

Application:: Continuity Type:: Parent Application:: Parent Filing Date::

**Foreign Priority Information** 

Country:: Application number:: Filing Date::

**Assignee Information** 

Assignee Name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::